## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number 10 661, 139

| . CLAIMS AS FILED - PART (Column 1)                                      |  |   |               |                                |                     | mn 2)            |   | SMALL ENTITY TYPE   |                        | OR  | OTHER THAN          |                        |  |
|--|--|---|---------------|--------------------------------|---------------------|------------------|---|---------------------|------------------------|-----|---------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 41            |                                |                     |                  | 1 | RATE                | FEE                    |     | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED  |                                | NUMBI               | ER EXTRA         |   | BASIC FEE           | 375.00                 | OR  | BASIC FEE           | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 4 minus 20= * |                                | • 1                 | · 2              |   | X\$ 9=              | 199                    | OR  | X\$18=              |                        |  |
| IND  | EPENDENT CL  | AIMS                                      | 15 minus 3 =  |                                | 12                  |                  |   | X42=                | 504.                   | OR  | X84=                |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |               |                                |                     |                  |   | +140=               |                        | OR  | +280=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |               |                                |                     |                  | • | TOTAL               | 1068.                  | - 1 | TOTAL               |                        |  |
| CLAIMS AS AMENDED - PART II  |  |   |               |                                |                     |                  |   | SMALL               |                        | OR  | OTHER<br>SMALL      |                        |  |
| AMENDMENT A  | :  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | :             | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | .41                                       | Minus         | ** 4                           | 4                   | •/               |   | X\$ 9=              |                        | ÓR  | X\$18=              |                        |  |
| AME  | Independent  | • /5                                      | Minus         | *** /                          | 5_                  | °/               |   | X42 <b></b>         |                        | OR  | X84=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |  |   |               |                                |                     |                  |   | +140=               |                        | OR  | +280=               |                        |  |
| 111.7  |  |   |               |                                |                     |                  |   | YOTAL<br>NOOIT, FEE |                        | OR  | TOTAL<br>ADOIT, FEE |                        |  |
| <u>.                                    </u>                             | 114/06   | (Column 1)                                |               | (Colur                         |                     | (Column 3)       |   |                     |                        |     |                     |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUMI<br>PREVIO<br>PAID | BER                 | PRESENT<br>EXTRA |   | RATE .              | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | • 42                                      | Minus         | ** 4                           | 71                  | -/               |   | X\$*8-2             | 25,00                  | OR  | X\$18=              |                        |  |
| ME   | Independent  | · 10                                      | Minus         | and /                          | 5                   | Ø                |   | X42=                |                        | OR  | X84=                |                        |  |
|  | FIRST PRESE  | NTATION OF MI                             | JLTIPLE DEF   | ENDENT                         | CLAIM               |                  | ! | +140=               |                        | OR  | +280=               |                        |  |
| •  |  |   |               |                                |                     |                  |   | TOTAL<br>VODIT, FEE | 25.00                  | OR  | TOTAL<br>ADDIT, FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |   |               |                                |                     |                  |   |                     |                        |     |                     |                        |  |
| ENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUMI<br>PREVIO<br>PAID | ESY<br>BER<br>OUSLY | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE | •   | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NON  | Total  | •   | Minus.        | **                             |                     | -                |   | X\$ 9=              |                        | OR  | X\$18=              | ·                      |  |
| AMENDME  | Independent  | •   | Minus         | ***                            |                     | -                |   | X42=                |                        | OR  | X84=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |  |   |               |                                |                     |                  |   | +140=               |                        | OR  | +280=               |                        |  |
| • [  | * If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  |   |               |                                |                     |                  |   |                     |                        |     | TOTAL               |                        |  |
|  | ** If the entry in column 1 is less than the entry in column 2, write 0 in column 2.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |               |                                |                     |                  |   |                     |                        |     |                     |                        |  |